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| | | | | Narendra R. Thappeta | | | (Signature) |
| | | | | 11/04/2006 | | | (Date) |
| APPLICATION NO. | APPLICATION NO. FILING DATE | | FIRST NAMED INVENTO | R ATTORNEY DOCKET NO. | | DOCKET NO. | CONFIRMATION NO. |
| 10/708,899 | 10/708,899 03/30/2004 | | | H0005369 | | | 2898 |
| TITLE OF INVENTION | : EVACUATION SYST | EMS PROVIDING ENH | ANCED OPERATIONA | AL CONTROL | | | |
| | | | | | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DU | E PREV. PAID ISSU | E EEE TO | 'AL FEE(S) DUE | DATE DUE |
| | NO NO | \$1400 | \$300 | \$0 | 101 | \$1700 | 01/02/2007 |
| nonprovisional | | | , , , , , , , , , , , , , , , , , , , | ¬ ~ | | 31700 | 011022007 |
| EXAMINER ART UNIT | | | CLASS-SUBCLASS | | | | |
| GOINS, DAVETTA WOODS 2612 340-692000 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list | | | | | | | |
| CFR 1.363). | 2. For printing on the (1) the names of up | to 3 registered pater | | Norend | ira Reddy Thappeta | | |
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| "Fee Address" ind PTO/SB/47; Rev 03-(Number is required. | ication (or "Fee Address 12 or more recent) attach | registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | | |
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| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | | |
| Honeywell International, Inc. Morristown, New Jersey | | | | | | | |
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| Typed or printed name Narendra R. Thappeta Registration No. 41,416 | | | | | | | |
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